

APPLICATION FOR SELECTED TUITION PLAN APPEAL

Return completed application to Student Financial Services

Student's Name: ______ Student ID Number: ______

Email: _____ Local Phone No. _____

This form is for students wishing to Opt In or Opt Out of the Eagle Express Tuition Plan after the selection date has passed. Appeal applications must be received on or before the 12th class day of the term (4th class day during Summer terms) of your initial enrollment at UNT. Response to appeal should be received within two weeks of date of submission to your student's UNT e-mail account.

SUMMARY OF SPECIAL CIRCUMSTANCES

Please summarize your special circumstances.

Certification: I certify that the information provided on this form is correct. I understand that if my appeal is granted that my student account will be adjusted accordingly. I understand that this may result in my owing an additional amount on my student account.

Student's Signature:	Da	ate:
For office use only:		
Recommendation:		
() Approved () Denied		
Comments:		
1155 Union Circle #310620	940.565.3225	Eagle Student Service Center Room 10